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ACT/007/038 Incoming

State of Utah
JON M. HUNTSMAN, JR.
Governor

GARY HERBERT
Lieutenant Governor

Department of
Environmental Quality

Richard W. Sprott
Executive Director

DIVISION OF WATER QUALITY
Walter L. Baker, P.E.
Director

August 28, 2008

Mr. Dennis Ware, Environmental Coordinator
Plateau Mining Corp.
PO Box 30
Helper, Utah 84526

Subject: Compliance Evaluation Inspection – UPDES Permit No. UTG040012.

Dear Mr. Ware:

On August 26, 2008 I met with you and conducted an inspection in regards to the former Willow Creek Mine facility, Crandall Canyon #2 Mine Shaft dewatering site and UPDES Permit No. UTG040012. Specifically we observed the recently reclaimed areas, former outfall location, and receiving waters. No deficiencies were observed and no response is required at this time. As noted in the inspection and in our previous correspondence, the two remaining outfalls have been inactivated and future DMRs will no longer need to be submitted so long as the potential to discharge remains obviated.

Enclosed is a copy of the inspection report for your records. I have appreciated your compliance efforts and in keeping me informed of the operations along the way. If you have any questions, please contact me at (801) 538-6779 or by e-mail at jstudenka@utah.gov.

Sincerely,

Jeff Studenka

Jeff Studenka, Environmental Scientist
UPDES IES Section

Enclosures

cc (w/encl): Jennifer Meints, EPA Region VIII
Claron Bjork, SE District Health Department
Dave Ariotti, SE District Engineer
Daron Haddock, Division of Oil Gas & Mines

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288 North 1460 West • Salt Lake City, UT
Mailing Address: P.O. Box 144870 • Salt Lake City, UT 84114-4870
Telephone (801) 538-6146 • Fax (801-538-6016 • T.D.D. (801) 536-4414
www.deq.utah.gov

United States Environmental Protection Agency
Washington, D.C. 20460

Water Compliance Inspection Report

Section A: National Data System Coding *(i.e., ICIS)*

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac. Type
N (1, 2)	UTG040012 (3–11)	080826 (12–17)	C (18)	S (19)	2 (20)

Remarks (21–66)

Inspection Work Days	Facility Self-Monitoring Evaluation Rating	BI	QA	Reserved
2 (67, 69)	5 (70)	N (71)	N (72)	(73, 74) (75–80)

Section B: Facility Data

Name and Location of Facility Inspected *(For industrial users discharging to POTW, also include POTW name and NPDES permit number)*

Plateau Mining Corp., Willow Creek Mine & Crandall Canyon Reclamation Sites:
~3 miles north of Helper, Utah off US 6 HWY, about 1 mile west from HWY.
~1 miles north of Helper, Utah off US 6 HWY, about 1 mile east on US 191 HWY.

Entry Time/ Date	Permit Effective Date
8:00 am / 8-26-2008	5-1-2008
Exit Time/ Date	**Permit Expiration Date**
8:40 am / 8-26-2008	4-30-2013

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)

Dennis Ware, Environmental Coordinator
Plateau Mining Corp., Willow Creek Mine
(801) 472-4737

Other Facility Data *(e.g., SIC NAICS, and other descriptive information)*

Inactive underground mining operation
SIC code 1222
NAICS No. 212112

Name, Address of Responsible Official/Title/Phone and Fax Number

Dennis Ware, Environmental Coordinator
Plateau Mining Corp., Willow Creek Mine
PO BOX 30
HELPER, UT 84526
(801) 472-4737

Contacted ☒ Yes ☐ No

Section C: Areas Evaluated During Inspection *(Check only those areas evaluated)*

☒ Permit	☒ Self Monitoring Program	☐ Pretreatment	☐ MS4
☒ Records/Reports	☐ Compliance Schedule	☐ Pollution Prevention	
☒ Facility Site Review	☐ Laboratory	☒ Storm Water	
☒ Effluent/Receiving Waters	☒ Operations & Maintenance	☐ Combined Sewer Overflow	
☒ Flow Measurement	☐ Sludge Handling/Disposal	☐ Sanitary Sewer Overflow	

Section D: Summary of Findings/Comments

(Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)

SEV Codes	SEV Description

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Phone and Fax Number(s)	Date:
JEFF STUDENKA, ENVIRONMENTAL SCIENTIST Jeff Studenka	DWQ (801) 538-6779	8-27-08
Name and Signature of Management Q A Reviewer	**Agency/Office/Phone and Fax Number(s)**	**Date:**
MIKE HERKIMER, MANAGER UPDES IES SECTION Mike Herkimer	DWQ (801) 538-6058	8/28/08

INSPECTION PROTOCOL

UPDES Permit #: UTG040012
Inspection Type: Compliance Evaluation Inspection
Inspection Date: August 26, 2008

Jeff Studenka of the Division of Water Quality (DWQ) met with Dennis Ware of Plateau Mining Corp. at the reclaimed Willow Creek Mine Crandall Canyon site. The purpose for the site visit was explained and a compliance evaluation inspection was performed since the permit coverage was recently renewed. The U.S. EPA Region 8 NPDES Inspection Checklist was completed and a facility tour was conducted to verify final reclamation and outfall inactivation.

FACILITY DESCRIPTION

Location: ~3 miles north of Helper, UT off US 6 HWY, ~1 mile west of the HWY.
Coordinates: Outfall 016 (new discharge) lat. 39° 45' 06", long. 110° 54' 48"

Average Flow: ~300 gpm for 1-2 days only (Outfall 016), Zero discharge to date from Outfall 001.

Receiving waters: Crandall Canyon drainage & Willow Creek → Price River

Process: Former underground coal mining operation facility. The mining operations are no longer present and reclamation activities were completed several years ago. Outfall 001 remains on site as the sedimentation pond utilized to collect surface water runoff at the former main office facility, which has recently been sold to the College of Eastern Utah. Outfall 001 will likely never discharge due to its size and has been inactivated. Outfall 016 was added to the existing UPDES general permit coverage, via a permit modification effective April 16, 2007, to provide for the temporary dewatering of the #2 Mine Shaft in Crandall Canyon, which subsided several hundred feet in November 2006 and subsequently filled with ground water. A pump was placed into the mine shaft water column and was pumped out at a rate of ~300 gpm and into the natural canyon drainage. Dewatering operations were completed in July 2007 and the shaft was safely backfilled and the area reclaimed once again by spring of 2008. Outfall 016 is no longer in place; the potential to discharge obviated and thus has been inactivated as well.

INSPECTION SUMMARY

There were no deficiencies noted during the previous inspection for follow up. A site visit to the former mining facility on Willow Creek followed a visit to Crandall Canyon, which included observing the reclaimed areas of Crandall Canyon and Willow Creek, and the receiving waters both upstream and downstream of the former facility areas. DMR data for July 2007 were compared to the laboratory bench sheets. Flows were measured on site by an in-line flow thru meter. Samples were sent to SGS Labs in nearby Huntington for TSS, TDS, total iron, pH, and oil & grease testing. Information provided on the DMR was consistent with the data reported on the laboratory bench sheets. The appropriate numbers of samples were collected using the methods specified in the permit. There were no deficiencies observed.

USEPA REGION 8 NPDES INSPECTION CHECKLIST

NPDES PERMIT #: UTG040012 INSPECTION DATE: 8-26-08

FACILITY: AMC Willow Creek Mine (Industrial) on site: 8:00 am
off site: 8:40 am
Dennis Ware - Admin. Controller

I. PERMIT VERIFICATION

(YES) NO **Inspection observations verify information contained in permit.**

(Yes) No N/A 1. Current copy of permit on site (@ office)

(Yes) No N/A 2. Name, mailing address, contact, and phone number are correct in PCS. If not, indicate correct information on Form 3560.

3. Brief description of the wastewater treatment plant:

One sedimentation pond on site (001) owned by CEU for surface water runoff events. Low potential to discharge, NO to date.

(Yes) No N/A 4. Facility is as described in permit. If not, what is different? _____

Yes No (N/A) 5. EPA/State has been notified of any new, different, or increased loading to the WWTP.

(Yes) No N/A 6. Number and location of discharge points are as described in the permit 001 & 016 have been recently inactivated.

(Yes) No N/A 7. Name of receiving water(s) is/are correct. [Crandall Canyon + Willow Creek]

Comments: Facility reclaimed, inactive status as of 8-1-08, verification inspection by DWQ.

II. RECORDKEEPING AND REPORTING EVALUATION

(YES) NO **Records and reports are maintained as required by permit.**

(Yes) No N/A 1. All required information is current, complete, and reasonably available.

(Yes) No N/A 2. Information is maintained for the required 3 year period.

3. Sampling and analysis data are adequate and include: 016 outfall discharge events in 2007 only.

(Yes) No N/A a. Dates, times, locations of sampling.
(Yes) No N/A b. Initials of individual performing sampling.
(Yes) No N/A c. Referenced analytical methods and techniques in conformance with 40 CFR Part 136.
(Yes) No N/A d. Results of analyses and calibration.
(Yes) No N/A e. Dates of analyses (and times if required by permit).
(Yes) No N/A f. Initials of person performing analyses.
(Yes) No N/A g. Instantaneous flow at grab sample stations.

Yes No N/A 4. Sampling and analysis completed on parameters specified in permit.

Yes No N/A 5. Sampling and analysis done in frequency specified by permit.

Comments:

July 2007 DMR audited

YES NO **DMR completion meets the self-monitoring reporting requirements.**

Yes No N/A 1. Monitoring for required parameters is performed more frequently than required by permit. Parameter(s) Permittee did 5 separate sampling events prior to discharge

Yes No N/A 2. Analytical results are consistent with the data reported on the DMRs.

Yes No N/A 3. All data collected are summarized on the DMR. (for representative UPDES samples)

Yes No N/A 4. Monthly, weekly, and/or daily average loading values are calculated properly and reported on the DMR. *(Effluent loadings are calculated using effluent flow.)*

Yes No N/A 5. The geometric mean is calculated and recorded for fecal coliform data.

Yes No N/A 6. Weekly and monthly averaging is calculated properly and reported on the DMR.

Yes No N/A 7. The maximum and minimum values of all data points are reported properly.

Yes No N/A 8. The number of exceedances column (No. Ex.) is completed properly.

Comments:

July 2007 DMR audited

II. WHOLE EFFLUENT TOXICITY TESTING AND REPORTING

No WET testing requirements

'ES NO N/A **WET sampling by permittee adequate to meet the conditions of the permit.**

'es No a. Chain of custody used.

'es No b. Method of shipment and preservation adequate *(iced to 4°C)*.

c. Type of sample collected _____ *(as required by permit)*.

'es No d. Holding time met *(received w/in 36 hours)*.

'es No N/A 2. Lab reports/chain of custody sheets indicate temperature of sample at receipt by lab.

a. Indicate temperature _____

es No N/A 3. Permittee has copy of the latest edition of testing methods or Region 8 protocol. *(Latest version is July 1993 - Colorado has its own guidance.)*

es No N/A 4. Permittee reviews WET lab reports for adherence to test protocols.

es No N/A 5. Lab has provided quality control data, i.e., reference toxicant control charts.

Yes No N/A 6. Permittee has asked lab for QC data.

Yes No N/A 7. Permittee maintains copies of WET lab reports on site for required 3 year period, and makes them available for review by inspectors.

Yes No N/A 8. Evaluation and review of WET data by permittee adequate such that no follow up at lab is necessary. *(Follow up to be conducted by EPA and/or State.)*

Comments: No WET testing requirements

IV. FACILITY SITE REVIEW No equipment or facility operations remain on site.

YES NO N/A **Treatment facility properly operated and maintained.**

Yes No N/A 1. Standby power or other equivalent provision is provided. Specify type:
Reclaimed mine site, no power or equipment on site

Yes No N/A 2. Facility has an alarm system for power or equipment failures. What kind of problems has the facility experienced due to power failures? None

Yes No N/A 3. Treatment control procedures are established for emergencies.

Yes No N/A 4. Facility can be by-passed (internal, collection system, total). Describe by-pass procedures:

Yes No N/A 5. Regulatory agency was notified of any bypassing (treated and/or untreated).

Dates:

Yes No N/A 6. WWTP has adequate capacity to ensure against hydraulic and/or organic overloads.
oversized sed. pond, no discharges to date, no discharge potential

Yes No N/A 7. All treatment units, other than back-up units, are in service. If not, what and why?
Lone sedimentation pond (001)

Yes No N/A 8. O&M manual available and up-to-date.

Yes No N/A 9. Procedures for plant O&M, including preventive maintenance schedules, are established and performed on time.

Yes No N/A 10. Adequate spare parts and supplies inventory (including flow meters) are maintained, as well as major equipment specifications and/or repair manuals.

Yes No N/A 11. Up-to-date maintenance and repair records are kept for major pieces of equipment.

12. Number of qualified operators and staff. n/a

How many?	Certification Level
_____	_____
_____	_____
_____	_____

Yes No (N/A) 13. Certification level meets State requirement?

14. What procedures or practices are used to train new operators? n/a

V. SAFETY EVALUATION

(YES) NO **Facility has the necessary safety equipment.**

Yes No (N/A) 1. Procedures are established for identifying out-of-service equipment. What are they?
no equipment left onsite

(Yes) No N/A 2. Personal protective clothing provided (safety helmets, ear protectors, goggles, gloves, rubber boots with steel toes, eye washes in labs).

Yes (No) N/A 3. Laboratory safety devices (eyewash and shower, fume hood, proper labeling and storage, pipette suction bulbs) available. No Lab on site

(Yes) No N/A 4. Plant has general safety structures such as rails around or covers over tanks, pits, or wells. Plant is enclosed by a fence. – Yes

Yes No (N/A) 5. Portable hoists for equipment removal available. no equipment

(Yes) No N/A 6. All electrical circuitry enclosed and identified (office building only)

7. Chlorine safety is adequate and includes: no Cl

Yes No (N/A) a. NIOSH-approved 30-minute air pack.
Yes No (N/A) b. All standing chlorine cylinders chained in place.
Yes No (N/A) c. All personnel trained in the use of chlorine.
Yes No (N/A) d. Chlorine repair kit.
Yes No (N/A) e. Chlorine leak detector tied into plant alarm system.
Yes No (N/A) f. Ventilation fan with an outside switch.
Yes No (N/A) g. Posted safety precautions.

(Yes) No N/A 8. Warning signs (no smoking, high voltage, nonpotable water, chlorine hazard, watch-your-step, and exit) posted.

Yes No (N/A) 9. Gas/explosion controls such as pressure-vacuum relief valves, no smoking signs, explosimeters, and drip traps present near anaerobic digesters, enclosed screening or degritting chambers, and sludge-piping or gas-piping structures.

(Yes) No N/A 10. Emergency phone numbers listed. (offices)

Yes No N/A 11. Plant is generally clean, free from open trash areas.

Yes No N/A 12. MSDS sheets, if required, are accessible by employees. office location

Comments:

VI. FLOW MEASUREMENT

YES NO FLOW MEASUREMENT MEETS THE REQUIREMENTS AND INTENT OF PERMIT

A. PRIMARY EFFLUENT FLOW MEASUREMENT

1. Flow thru meter w/ totalizer for 016

1. General

Type of primary flow measurement device: 2 manual calculations from spillway or discharge pipe (bucket + stopwatch) for 001

Yes No N/A 1. Primary flow measuring device is properly installed and maintained.

Where? portable flow meter for 016 temp. outfall

Yes No N/A 2. Flow measured at each outfall. Number of outfalls: 2 (001 + 016)

no flow or discharge from 001

3. Frequency of routine inspection of primary flow device by operator: _____/day. as needed

4. Frequency of routine cleaning of primary flow device by operator: _____/week. as needed

Yes No N/A 5. Influent flow is measured before all return lines.

Yes No N/A 6. Effluent flow is measured after all return lines.

Yes No N/A 7. Proper flow tables are used by facility personnel.

8. Design flow: _____mgd. ~500 gpm (016)

Yes No N/A 9. Flow measurement equipment adequate to handle expected ranges of flow rate.

2. Open Channel Primary Flow Measuring Devices

Flumes

Type and size: N/A EFF

Yes No N/A 1. Flume is located in a straight section of the open channel, without bends immediately upstream or downstream.

Yes No N/A 2. Flow entering flume appears reasonably well distributed across the channel and free of turbulence, boils, or other distortions.

Yes No N/A 3. Flume is clean and free of obstructions, debris or deposits.

Yes No N/A 4. All dimensions of flume accurate and level.

Yes No N/A 5. Sides of flume throat are vertical and parallel.

Yes No N/A 6. Side walls of flume are vertical and smooth.

Yes No N/A 7. Flume head is being measured at proper location. *(Location dependent on flume type - see NPDES Compliance Inspection Manual or ISCO book.)*

Yes No N/A 8. Flume is under free flow conditions at all times. *(Flume is not submerged.)*

Weirs

Type: N/a EFF

Yes No N/A 1. Weir is level.

Yes No N/A 2. Weir plate is plumb and its top edges are sharp and clean.

Yes No N/A 3. Downstream edge of weir is chamfered at 45°.

Yes No N/A 4. There is free access for air below the nappe of the weir.

Yes No N/A 5. Upstream channel of weir is straight for at least four times the depth of water level, and free from disturbing influences.

Yes No N/A 6. Distance from sides of weir to side of channel at least 2H.

Yes No N/A 7. Area of approach channel at least 8 x nappe area for upstream distance of 15H. *(If not, is velocity of approach too high?)*

Yes No N/A 8. Weir is under free-flow conditions at all times. *(Weir is not submerged.)*

Yes No N/A 9. The stilling basin of the weir is of sufficient size and clear of debris.

Yes No N/A 10. Head measurements are properly made by facility personnel.

Yes No N/A 11. Weir is free from leakage.

3. Closed Channel Primary Measuring Devices

Electromagnetic Meters

Type and model: N/a EFF

Yes No N/A 1. There is a straight length of pipe or channel before and after the flowmeter of at least 5 to 20 diameters.

Yes No N/A 2. There are no sources of electric noise in the near vicinity.

Yes No N/A 3. Magnetic flowmeter is properly grounded.

Yes No N/A 4. Full pipe requirement is met.

Venturi Meters

Type and model: N/a EFF

Yes No N/A 1. Venturi meter is installed downstream from a straight and uniform section of pipe?

B. Secondary Flow Measurement primary only

1. General

1. What are the most common problems that the operator has had with the secondary flow measurement device? N/a

Yes No N/A 2. Flow records properly kept.
Yes No N/A a. All charts maintained in a file.
Yes No N/A b. All calibration data kept.

Yes No N/A 3. Secondary device calibration records are kept.

a. Frequency of secondary device calibration:____ / year.

4. Frequency of flow totalizer calibration:___ / year.

Yes No N/A 5. Secondary instruments (totalizers, recorders, etc.) are properly operated, calibrated, and maintained.

Floats

Type and model: n/a EFF

Bubblers

Type and model: n/a EFF

Ultrasonic

Type and model: n/a EFF

Electrical

Type and model: n/a EFF

Comments: Potential to discharge has been obviated. Permittee requested inactivation of remaining outfalls (001 + 016). Reclamation verification confirmed.

2. Flow Verification

Accuracy of Flow Measurement (Secondary against Primary) n/a	
	Type and size of primary device
	EFF:
Reading from primary standard, feet and inches	
Equivalent to actual flow, mgd	
Facility-recorded flow from secondary device, mgd	
Percent Error	
Correction Factor	

Fill in above only if the primary device has been correctly installed, or if correction factor is known.

Comments: Primary only

VII. LABORATORY QUALITY ASSURANCE

(YES) NO **Laboratory procedures meet the requirements and intent of the permit.**

(Yes) No N/A 1. Commercial laboratory is used. (016 outfall only)

Parameters	TDS, TSS, O+G, IRON + other metals + pH
Name	SGS Labs
Address	Huntington
Contact	on file
Phone	

(Yes) No N/A 2. According to the permittee, commercial laboratory is State certified (ND & UT only).

Yes No (N/A) 3. Written laboratory quality assurance manual is available, if the facility does its own lab work. SGS Labs

Yes No (N/A) 4. Quality control procedures are used. Specify: SGS Lab

Yes No (N/A) 5. Calibration and maintenance of laboratory instruments and equipment is satisfactory. SGS labs

(Yes) No N/A 6. Samples are analyzed in accordance with 40 CFR 136.

Yes No (N/A) 7. Results of last DMR/QA test available. Date: SGS labs

Yes (No) N/A 8. Facility lab does analyses for other permittees. If yes, list the facilities and their permit numbers.

VIII. COMPLIANCE SCHEDULE STATUS REVIEW n/a

YES NO **The permittee is meeting the compliance schedule**

1. Is the facility subject to a compliance schedule either in its permit or in an order? If facility is subject to an order, note docket number:_____

N/A 2. What milestones remain in the schedule?_____

_____

(Attach additional sheets as necessary.)

Yes No N/A 3. Facility is in compliance with unachieved milestones.

Yes No N/A 4. Facility has missed milestone dates, but will still meet the final compliance date.

IX. PERMITTEE SAMPLING EVALUATION

YES NO **Sampling meets the requirements and intent of the permit.**

Yes No N/A 1. Samples are taken at sampling location specified by permit.

Yes No N/A 2. Locations are adequate for representative samples.

Yes No N/A 3. Flow proportioned samples are obtained.

Yes No N/A 4. Permittee is using method of sample collection required by permit.
Required method: grab
If not, method being used is:
( ) Grab
( ) Manual
( ) Automatic composite

Yes No N/A 5. Sample collection procedures adequate and include:
Yes No N/A a. Sample refrigeration during compositing.
Yes No N/A b. Proper preservation techniques.
Yes No N/A c. Containers in conformance with 40 CFR 136.3.
Specify any problems:_____

_____

Comments: 2 discharge events in 2007 for outfall 016 is the only DMR data on file upon review of files back to 2003.